

ISSUE SLIP STAPLE AREA (for additional cross references)

703/864

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Not rejected
 I Not allowed
 A Appeared
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	2	51	52	101	102
2	3	53	54	103	104
3	4	55	56	105	106
4	5	57	58	107	108
5	6	59	60	109	110
6	7	61	62	111	112
7	8	63	64	113	114
8	9	65	66	115	116
9	10	67	68	117	118
10	11	69	70	119	120
11	12	71	72	121	122
12	13	73	74	123	124
13	14	75	76	125	126
14	15	77	78	127	128
15	16	79	80	129	130
16	17	81	82	131	132
17	18	83	84	133	134
18	19	85	86	135	136
19	20	87	88	137	138
20	21	89	90	139	140
21	22	91	92	141	142
22	23	93	94	143	144
23	24	95	96	145	146
24	25	97	98	147	148
25	26	99	100	149	150
26	27				
27	28				
28	29				
29	30				
30	31				
31	32				
32	33				
33	34				
34	35				
35	36				
36	37				
37	38				
38	39				
39	40				
40	41				
41	42				
42	43				
43	44				
44	45				
45	46				
46	47				
47	48				
48	49				
49	50				

if more than 150 claims or 10 additional
 staple additional sheet here

LEFT NO. OF